

Protective role of moderate alcohol drinking in systemic lupus erythematosus

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Dear Editor,

We appreciate the comments by Dr. Schubert et al. regarding our manuscript [1] and are glad to have the opportunity to clarify several points that they have raised in their letter.

Firstly, they said in the letter that our own most recent empirical work did not support the observation of our meta-analyses. It was a misunderstanding. In fact, the author Wang J in reference [3] (from the Division of Rheumatology, Tufts Medical Center, Boston, MA 02111, USA) was not the same person as Wang J in reference [2] (from the Department of Epidemiology and Biostatistics, School of Public Health, Anhui Medical University, 81 Meishan Road, Hefei, Anhui, 230032, PR China).

Secondly, their studies were a single-case study, which was anecdotal. Therefore, explanations for the correlation between alcohol drinking and systemic lupus erythematosus (SLE) are still unclear. Just as they referred in the letter, “the underlying mechanisms of the current findings remain far from clear.”

In spite of these above, their integrative approach provided deep insights into the complex associations between daily alcohol consumption and cellular immune activation in SLE, deeper than conventional group research can achieve. However, apart from the influence of alcohol drinking on cellular immune regulation in SLE, we believe that there are other explanations for the protective role of alcohol drinking in SLE. For example, it has been reported that alcohol in low and moderate doses seem to benefit the blood vessel, since SLE is a systemic autoimmune disease that mainly affect the blood vessel connective tissue, producing inflammation of the blood vessel wall; moderate alcohol drinking might be protective for SLE through benefiting the blood vessel. Nevertheless, further follow-up studies with large sample size are still needed to confirm these results.

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Disclosures None

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